

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	EB	230	119
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	YC	2017	1-27-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	8/24/00
2	4/23/01
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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